

Form 13
Revised (1/1/1999)EMPLOYEE PERFORMANCE APPRAISAL
STATE OF ALABAMA
Personnel DepartmentTop *range*
Number
of StepsEmployee Name: Mildred T Groggel

Social Security Number: _____

Agency: 061/Mental Health & RetardationDivision: 309E/Brewer Dev CtrClassification: Dir of MR Program SvcsClass Code: A3200Period Covered From: 03/01/2002 To: 03/01/2003Annual Raise Effective: May 2003**APPRAISAL SIGNATURES:** Signatures are to be provided after the form has been completed.

Rating Supervisor

Employee

Reviewing Supervisor

SSN _____

L. Groggel
Signature 2/24/03

Date _____

SSN _____

Mildred Groggel
Signature 2-24-03

Date _____

Signature _____

Initial if comments are attached _____

Initial if comments are attached _____

Initial if comments are attached _____

PERFORMANCE APPRAISAL SCORE: Locate the Responsibility Score on the back of this form and write it in the appropriate space. Locate the Disciplinary Score, also on the back of this form, and write it in the appropriate space. The Disciplinary Score is subtracted from the Responsibility Score to derive the Performance Appraisal Score.34Responsibility
Score0Disciplinary
Score34Performance Appraisal
Score

This employee's work:

Does Not Meet
Standards
(6.6 or below)Partially Meets
Standards
(6.7 - 16.6)Meets
Standards
(16.7 - 26.6)Exceeds
Standards
(26.7 - 36.6)Consistently
Exceeds Standards
(36.7 - 40)**WORK HABITS:** Check the appropriate box for each work habit area. If "Noncompliance" is to be marked, a step of the discipline system (warning, reprimand, suspension) must have been taken with the employee during the appraisal period. See the Disciplinary Actions area on the back of this form for disciplinary documentation.

Compliance Noncompliance

Attendance

Punctuality

Cooperation with Coworkers

Compliance with Rules

PLAINTIFFS
EXHIBIT

RCVD 13:06 FEB26'03

15

1582

RESPONSIBILITIES: List an abbreviated version of the employee's responsibilities below as documented on and discussed during the Preappraisal. Record the appropriate rating in the box for each responsibility. Rating(s) of appropriate responsibilities should reflect any disciplinary action(s) that has been taken during this appraisal period.

| 0 Does Not Meet Standards | 1 Partially Meets Standards | 2 Meets Standards | 3 Exceeds Standards | 4 Consistently Exceeds Standards |
|---------------------------------|-----------------------------------|-------------------------|---------------------------|----------------------------------------|
|---------------------------------|-----------------------------------|-------------------------|---------------------------|----------------------------------------|

| <i>Responsibility</i> | <i>Rating</i> |
|-----------------------------------------------------------------------------------------------------------------------------------------|---------------|
| Provide adequate and appropriate supervision and direction to key leadership and other staff of Habilitation Services. | 3 |
| Manage Habilitation Service's delivery system/operations so that consumers are provided with identified needs and rights are protected. | 4 |
| Maintain a residential/habilitation environment of care that provides for the safety and protection of consumers. | 4 |
| Maintain Medicaid Title XIX ICF/MR certification of the Center without "jeopardy" status or less than "certified" status. | 4 |
| Serves on the facility's senior management team and participates in Task Forces/Committees. | 4 |
| Represents the facility in interactions with families, DMH/MR and other agencies, professional colleagues and the general public. | 3 |
| Ensure in-service training of all staff assigned to Habilitation Svcs. | 3 |
| Develop an annual Habilitation Services strategic plan. | 3 |
| Reviews and evaluate expenditures. | 3 |
| 10. | |

RESPONSIBILITY SCORE:

$$\frac{31}{9} = 3.4 \times 10 = 34$$

| | | | |
|-------------------------------------------|----------------------------|-------------------------------|----------------------|
| Total of Responsibilities/Results Ratings | Number of Responsibilities | Average Responsibility Rating | Responsibility Score |
|-------------------------------------------|----------------------------|-------------------------------|----------------------|

DISCIPLINARY ACTIONS: Any disciplinary action taken with the employee during this appraisal period is to be listed below. For each area, list the specific disciplinary step taken, the date of action, and the reason or unwanted behavior it involved. Copies of disciplinary documentation are to be maintained in the agency's personnel files. Remember, appropriate responsibilities and work habit(s) should reflect the fact that performance required disciplinary action.

DISCIPLINARY SCORE: This section should include the use of the discipline steps of reprimand and suspension only. The Disciplinary Score does not include warnings (oral). Warnings are documented only in the Work Habits and Disciplinary Actions areas. Identify the most severe step of the discipline system that has been utilized with the employee during this appraisal period. If the most severe step was one or more reprimands, the Disciplinary Score will be 7. If the most severe step was one or more suspensions, the Disciplinary Score will be 17. Otherwise, the Disciplinary Score will be zero.

DISCIPLINARY SCORE: _____